



A Public Service Agency

POWER OF ATTORNEY

VEHICLE/VESSEL DESCRIPTION

| IDENTIFICATION NUMBER | YEAR MODEL | MAKE | LICENSE PLATE/CF # | MOTORCYCLE ENGINE # |
|-----------------------|------------|------|--------------------|---------------------|
| | | | | |

I, _____
PRINT NAME

I, _____
PRINT NAME

appoint:

PRINT NAME

as my attorney in fact, to complete all necessary documents, as needed, to transfer ownership as required by law.

ALL SIGNATURES MUST BE IN INK

I certify under penalty of perjury under the laws of the State of California that the information I have provided is true and correct.

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|---|------|-------|----------|------|---------------------|
| SIGNATURE REQUIRED BY PERSON APPOINTING POWER OF ATTORNEY | CITY | STATE | ZIP CODE | DATE | DL, ID, OR DEALER # |
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